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ABSTRACT

This final report describes major activities of a Maine project to develop a follow-up and follow-along survey instrument and data management system to allow local school districts to determine outcomes for graduates with disabilities and use this information in program review and modifications. The report explains the process used in the 1-year project and presents a literature review addressing school completion rates, participation in postsecondary education, group membership/affiliation, gender differences, vocational education in high school, employment rates, independent living, and classroom placement. Information is then provided on survey design and development, field testing the pilot survey, telephone survey results, and recommendations for conducting the survey. The survey, involving 127 individuals who had received special education services before exiting school, found that over 75 percent live with parents or relatives; two-thirds were working, though only three respondents earn less than minimum wage; 78 percent had participated in postsecondary education; and over half participate in activities outside home or get together with friends more than once a week. Appendices include both the telephone and mail versions of the survey and an exit data summary sheet. (Contains 21 references.) (DB)

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STUDENT OUTCOMES: STUDYING THE EFFECTIVENESS OF TRANSITION IN MAINE

FINAL REPORT

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Prepared by
Debbie Gilmer and Meg McElroy

July, 1993

Center for Community Inclusion
Maine's University Affiliated Program
University of Maine

This material was produced with funds awarded by the Committee on
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Change Project for Youth with Disabilities

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INTRODUCTION

The Committee on Transition, an interdepartmental collaborative effort of state and private agency providers, parents, consumers, and educators, has been funding local interagency transition coordination efforts throughout the state since 1987. In 1991 the Committee on Transition successfully applied for a federally funded statewide transition systems enhancement project. A year ago the Committee on Transition sought proposals in a discretionary grant competition. A number of individuals representing local transition and education agencies, including staff from the Center for Community Inclusion, Maine's University Affiliated Program at the University of Maine, collaborated on the design of a proposal seeking discretionary funds for the purpose of gathering outcome information on graduates of special education.

The intent of our application for discretionary funds was the development of a product--a follow-up and follow-along survey instrument and data management system--that would build the capacity of local school districts in Maine to follow their own graduates in order to assess their efforts to prepare youth with disabilities for adult life and to stimulate program review and appropriate modifications.

This final report presents the major activities undertaken during the course of the project year, documents the project's findings and makes recommendations for the use of the follow-up survey that was developed.

PROCESS

In collaboration with four of the ten Committee on Transition funded local coordination projects (Aroostook Council on Transition, Bangor Area Coordination Council, Southern Oxford County Council on Transition, and Southern Maine Advisory Council on Transition) that represented the geographic and cultural diversity of our state the Center for Community Inclusion identified eight interested and willing school districts. The eight participating school districts were SAD 27-Fort Kent, SAD 29-Houlton, Old Town, SAD 22-Hampden-Winterport-Newburgh, SAD 17-Norway-South Paris, SAD 39-Buckfield, Portland Public Schools, and SAD 71-Kennebunk. Each of the four transition projects was charged with identifying two school districts in their respective catchment areas willing to serve as field test sites. The districts that were identified entered into a collaborative relationship with the University when each superintendent signed an Intent to Participate form that also served as a release of otherwise confidential information. The Maine Department of Education, which serves as the fiscal agent for the Committee on Transition, also gave the University "agent of the state" status further assuring access to information. Each superintendent appointed a representative to serve on the project's Advisory Panel. In seven of eight of the participating districts this person was the Director of Special Education.

The Project Advisory Panel was comprised of the representatives from each of the school districts, representatives of each of the four transition projects, parents, a student with disabilities in the midst of transition, and representatives of the Bureau of Rehabilitation, the Division of Special Education and the Bureau of

Mental Retardation (see Table 1 for Panel Membership). The Advisory Panel's role was to guide and direct the activities of the project. **In particular, the panel was to assure that the instrument developed would be relevant and meaningful and readily usable by school districts at the conclusion of the project year.**

The Project was staffed by Center for Community Inclusion staff and consultants. Deborah Gilmer served as Project Coordinator. Ms. Gilmer is the Coordinator of Exemplary Programs and Technical Assistance at the Center for Community Inclusion. Meg McElroy was assigned half-time to the project as a research assistant. Ms. McElroy is a graduate student in special education (severe disabilities) in the College of Education. Kelly McClymer was assigned to the project as secretary two days/week. The Center contracted with the Margaret Chase Smith Center for Public Policy at the University of Maine for survey design and analysis. Charles Morris and Barbara Jean Nicoletti, Research Associates, were assigned to the project. Dr. James Chiavacci, Assistant Professor of Education, provided contract services to the project in the form of design and development of the data management system. Dr. Lucille Zeph, Director of the Center for Community Inclusion, provided administrative management of the project.

Table 1

**Student Outcomes: Studying the Effectiveness of Transition in Maine
Project Advisory Panel Membership**

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LITERATURE REVIEW

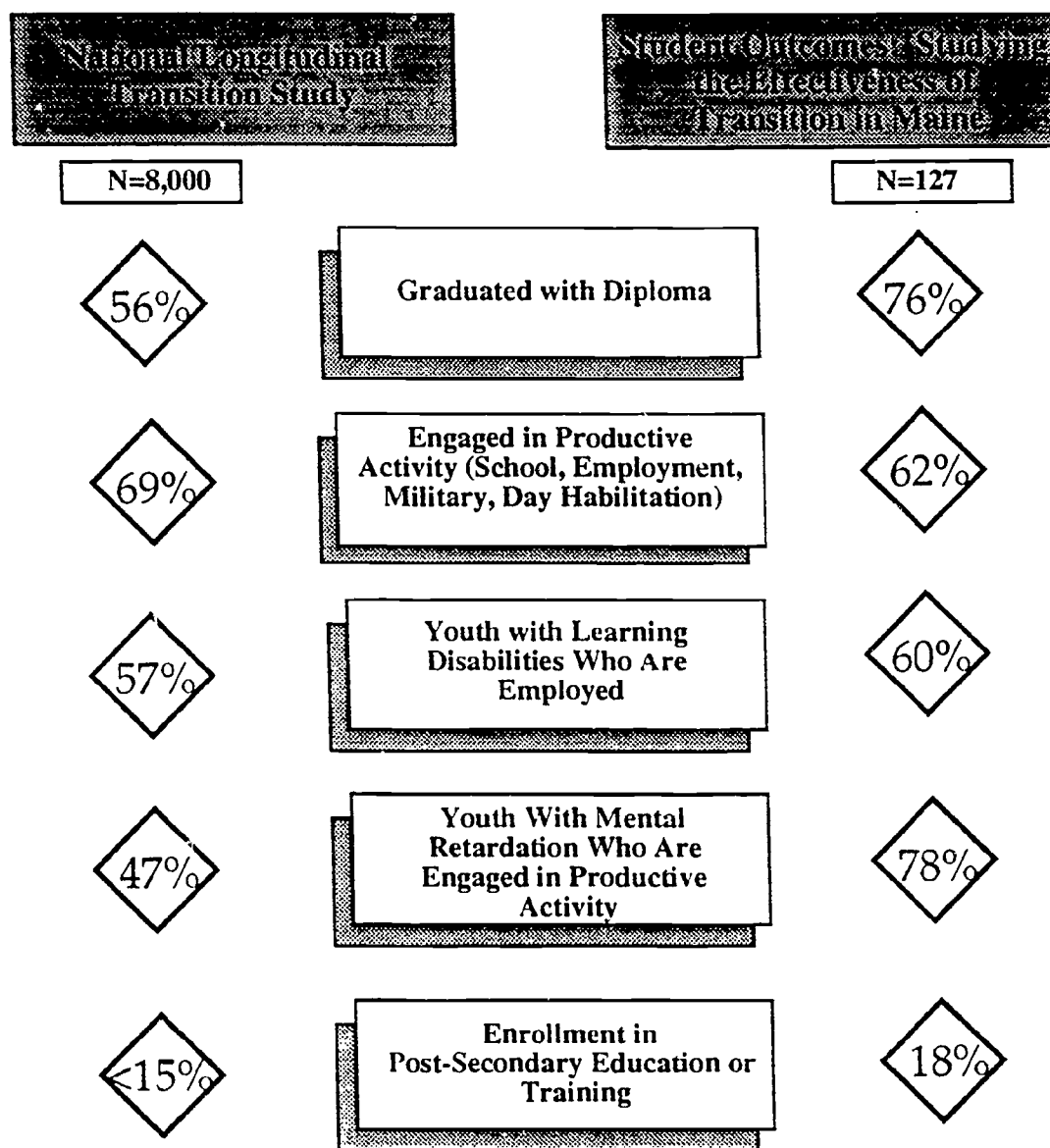
One of the project's first tasks was to review the work of researchers in other states who had explored and documented the experiences of young adults with disabilities as they exited high school and took their places as adult members of their communities.

The literature available was considerable and covered a broad range of outcome issues. A particularly valuable resource was the National Longitudinal Transition Study of Special Education Students, a six year study of student outcomes conducted by SRI International under contract to the Office of Special Education Programs in the U.S. Department of Education. In addition, the statewide studies conducted in Vermont, Iowa, Idaho, Colorado and New Hampshire served as valuable resources. This section of the report will highlight some of the findings from these and other outcome studies, including, where relevant, our own findings. Table 2 provides a sample of findings from the National Longitudinal Transition Study and the Maine study that is being presented on in this report.

A companion document to this report, *Student Outcomes: An Annotated Bibliography*, was developed as a component of this project and accompanies this final report. The annotated bibliography is the result of an exhaustive literature review conducted as a component of the survey design and development process. It is being disseminated in an attempt to share the wealth of information available in the literature with students, parents, teachers, guidance counselors, school administrators, transition coordinators and others involved in assisting young adults in their transition from school to the community and adulthood.

Table 2

A SAMPLE OF FINDINGS



School Completion Rates

Nationally, students with disabilities drop out of school at a rate of forty three percent as reported by the National Longitudinal Transition Study (Wagner, 1991b). In the general population, a drop out rate of twenty four percent is reported. In New Hampshire, students with disabilities drop out at a rate of forty six percent. In our study only one of the seventy one students participating in the pilot study was reported to have dropped out. Maine's Public School Performance Report (Maine Department of Education, 1992) reports that fifteen percent of students with disabilities who exited school in 1990-91 did so by dropping out. In the general population Maine's dropout rate was twenty six percent in 1989 (U.S. Department of Health, Education and Welfare, 1992).

The National Longitudinal Transition Study uncovered important implications of dropping out of school. Their research discovered that students with disabilities who dropped out were less likely to be competitively employed and less likely to be enrolled in postsecondary education programs when interviewed two years after high school exit. Nationwide, the employment rate of students with disabilities who dropout before completing high school is 44%. The employment rate of high school graduates with disabilities is 57%.

Participation in Postsecondary Education

Researchers (Frank and Sitlington, 1993) studying student outcomes in Iowa concluded that young adults with disabilities would remain at entry level jobs unless participation in postsecondary education increase. Nationally, 23% of students with disabilities as compared to 56% of students without disabilities participate in postsecondary education (Marder & D'Amico, 1992).

Students in New Hampshire participate in postsecondary education at rates of 8% for students with disabilities and 59% for students without disabilities (University of New Hampshire, 1991a). Lichtenstein (1993) concludes that planning for graduation should begin in junior high if students with disabilities are to accumulate the course credits necessary for graduation and thus facilitate participation in postsecondary education.

According to the Maine Public Schools Performance Report (Maine Department of Education, 1992), Maine students without disabilities enrolled in postsecondary education programs at a rate of 58%.

In our survey of former students with disabilities, 18% indicated that they were enrolled in postsecondary educational programs. Interestingly, 66% of these students had attended the same high school.

Group membership/affiliation

Nationally, students who were engaged in school or community groups while in high school have a consistent pattern of more positive postschool outcomes (Newman, 1991).

As one measure of group membership, we asked students if they had been involved in extracurricular activities when they were in high school. Fifty percent of the students who participated in our study responded that they had been involved in extracurricular activities while in high school. We found that former students who had been involved in extracurricular activities had an employment rate which was 14% higher than students who had not participated in extracurricular activities. In fact, 91% of the students who were enrolled in postsecondary education had participated in extracurricular activities while in high school.

Gender

The National Longitudinal Transition Study (Wagner, 1991c) found that the gaps between young women with disabilities and young women without disabilities are much wider than the gaps between young men with and without disabilities. Wagner also found that females with disabilities were significantly less likely than males with disabilities to receive occupationally oriented vocational training while in high school.

While young women with disabilities in New Hampshire have an overall higher employment rate than young men with disabilities, upon further analysis it was discovered that females earned significantly lower wages and were employed part time almost twice as often as young men (University of New Hampshire, 1992).

Our study found the female employment rate was 75% and for males it was 62%. While in high school, however, only 44% of the young women had participated in vocational education (as opposed to 60% of the young men).

Vocational Education in High School

According to findings from the National Longitudinal Transition Study (Wagner, 1991a), high school students with disabilities participate in vocational education at a rate of 65%. Those students who participated in vocational education were found to have a significantly lower absentee rate as well as a significantly lower probability of dropping out of school. Students who participate in vocational education while in high school were also found to have a higher rate of paid employment after school exit as well as a higher rate of enrollment in postsecondary vocational education.

Nisbet and Lichtenstein (1990) found that 90% of the students in their New Hampshire sample had been enrolled in vocational education courses while in high school and 71% of those who had participated in vocational education programs were employed.

In Maine, 53% of the students in our survey participated in vocational education programs. The postschool employment rate for students who had participated in vocational education was 71%. The rate for those students who had not participated in vocational education was 64%.

Employment Rates

Nationally, recent school exiters without disabilities not enrolled in postsecondary education were employed at a rate of 63%. Youth with disabilities were found to have a employment rate of 49% (Marder & D'Amico, 1992). In New Hampshire, 55% of young adults with disabilities were found to be employed following school exit (University of New Hampshire, 1991b).

In our study 64% of the respondents were employed with 31% being employed full time. Sixty-three percent of those employed were former students identified as having learning disabilities.

Independent Living

Nationally, 33% of youth without disabilities and 13% of youth with disabilities were living independently within the first two years of high school exit and there was a greater likelihood of independent living among former students who were competitively employed (Marder & D'Amico, 1992). Nisbet and Lichtenstein (1990) found that the majority of young adults with disabilities

in New Hampshire who had been out of school for one year continued to live with their parents or guardians.

Fourteen percent of the respondents to the Maine survey reported themselves living independently.

Classroom Placement

Haring and Lovett (1990) found that the majority of former students who had received their special education services in self contained classrooms were not living or working in integrated settings. These former students were found to have little or no contact with same aged peers without disabilities. Hudson, Schwartz, Sealander, Campbell, and Hensel (1988) reported that students who received their special education services in integrated settings while in high school were more likely to be successfully employed as adults. Frank and Sitlington (1993) found that for young adults with mental retardation attendance in at least some regular education classes while in high school was positively associated with employment. Wagner (1991a) reported that students who spent less than 67% of their day in regular education were competitively employed at a rate of 34% while students who spent more than 67% of their day in the regular classroom were found to be competitively employed at a rate of 67%.

In Maine, our findings indicate that students who received their special education services in the regular classroom were more likely to live independently of their parents following school exit and were significantly more likely to get together with friends more than once a week than former students who had received their special education services in resource, composite or self contained classrooms.

SURVEY DESIGN AND DEVELOPMENT

The final survey instruments produced by the project were the result of a development process which valued input from all project participants. The goal of the survey development process was to produce an instrument which could be used by local education agencies and would provide meaningful information to school officials. Representative potential users of the information participated in the development of the content of the surveys. Project and school district staff who conducted the interviews also participated in the development of the structure and wording of the survey. Two surveys, one to be used as a telephone survey and one to be used as a self-administered mail survey, were developed. Both questionnaires were designed to collect the same information with modifications relating to each survey mode.

A considerable portion of the first meeting of the Project Advisory Panel was devoted to the preliminary stages of survey development. Within the broad parameters identified in the project proposal, panel members were engaged in a discussion of what they wanted to know about the survey population. At this meeting, discussion was focused on the types of outcome information that would be meaningful and useful. Several categories of outcomes were agreed upon: post-secondary education status; employment status; living status; and, recreation/leisure status. In addition, the panel members identified more specific outcomes within each category.

Project staff compiled the information relating to outcome measures identified by the Advisory Panel. Surveys used in other state and national outcome studies were reviewed with specific questions categorized according to the major outcome categories. Project staff then prepared a draft survey

containing questions addressing each outcome area identified by the Advisory Panel. This draft was mailed to all panel members for review and comments at the next meeting. Input from the Advisory Panel was incorporated into the draft survey and a final pilot draft was mailed to panel members prior to conducting the pilot survey.

The project's data collection efforts served as the field test. Interviews were conducted by project staff as well as by school officials in two of the sites. Those conducting the interviews were asked to maintain notes relating to ease of use and flow of the questionnaire during the interviewing. After all the data were collected and analyzed, comments regarding the survey were received from those conducting the interviews and incorporated into the final survey (See Appendix A).

In addition to the survey, an instrument was developed to allow the school districts to collect from their own records information on former students. The goal in developing this instrument, the Exit Data Summary Sheet (See Appendix B), was to compile necessary baseline information on each school exiter. This instrument collects such information as identified disability, vocational school participation, placement, gender and last known address and phone.

FIELD TESTING THE PILOT SURVEY

In preparation for conducting the field test each former student received a letter from their director of special education. The letter explained the purpose of the survey and informed the student that they would soon receive either a survey in the mail or a phone call from the University.

An Exit Data Summary Sheet was filled out for each student by a representative from each participating school district. The survey process began as soon as the Exit Data Summary Sheets were received from the districts. Two of the districts chose to conduct their own field testing (SAD 22 and Old Town). In order to assure confidentiality, all identifying information was removed from the Exit Data Summary Sheets.

Each former student was assigned to one of three survey groups: mail version survey, phone version survey, or mail version with a phone follow up for nonrespondents. A self addressed stamped envelope and the mail version survey was sent to each student assigned to either the mail or the mail with phone follow up group. To facilitate the survey process, a Student Outcomes Survey Completion form was developed and filed with each Exit Data Summary Sheet (See Appendix C).

Phone

In January we began calling students assigned to the phone version. The time of day (and evening) when the phone call was made was varied in hopes of reaching the largest number of students possible. It was typical that attempts were made, at minimum, in late morning, mid afternoon, and in the evening. Students were, for the most part, very willing to participate. Parents were

helpful in assisting in identifying times that would be most fruitful in connecting with the former students. Occasionally students seemed initially hesitant, but only one actually refused to participate.

To complete the survey over the phone took as few as nine minutes and as many as twenty five minutes. Some students were not able to be reached and after four or five unsuccessful attempts they were dropped from the study. The Student Outcomes Survey Completion Form was used to keep track of who was called and when they were called. Using this form prevented, for example, calls being made to a student in the morning only and served as a good tool to keep track of suggested call back times.

The phone version had the highest response rate (See Table 3).

Mail with Phone Follow Up

Three weeks after the mail version surveys were sent out, we began the phone follow up phase if the completed survey had not been received. The students were asked if the survey had been completed and were encouraged to do so if they indicated that it had not yet been done. This proved ineffective as only a very few surveys were returned after the phone contact was made, therefore, the student was asked instead of their willingness to complete the survey over the phone. This strategy proved successful.

Mail Version

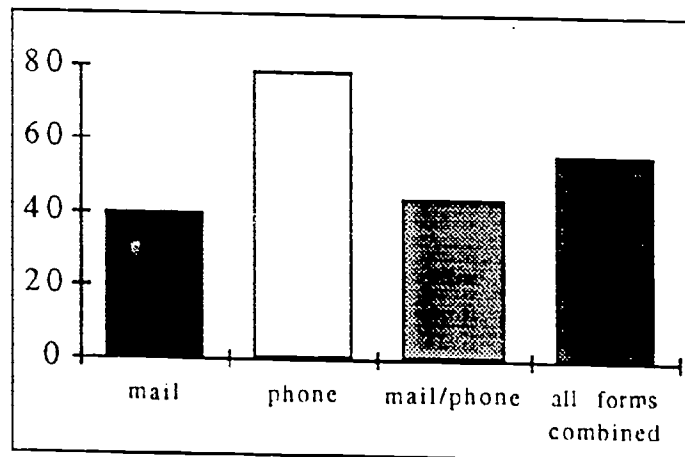
The mail version survey had the lowest response rate. Many of the surveys from one large district came back "Return to sender: Address Unknown." Although the response rate was lowest, it appears that students completing the mail version had a greater opportunity to process their responses;

for example, the question "What could your school have done differently or better" generated longer and seemingly more thoughtful responses than did the phone version.

PILOT SURVEY RESULTS

A total of one hundred twenty seven (127) individuals from the eight school districts comprised the survey population. They were identified as individuals with disabilities who had received special education services and supports during the 1991-92 school year which was the year in which they exited school. The former students from six of the eight districts were randomly assigned to be surveyed either by the self-administered mail survey, the mail survey with telephone follow-up for nonrespondents, or by the telephone interview. Two of the districts conducted their own surveys. One employed the telephone survey and the other employed the mail survey with phone follow-up.

Table 3
Survey Response Rates



Respondent Profile

The following profile of respondents to the survey is compiled from information provided by the districts on the Exit Data Summary Sheet.

- Nearly two-thirds (62.7%) of those responding were male
- The average age of respondents was 19 years
- Just over one-half of the respondents had learning disabilities
- Respondents with mental retardation accounted for 20.9% of the sample
- Respondents with behavioral impairments accounted for 16.4%
- One-half of the respondents were placed in the regular classroom
- Just over one-third were in a resource or resource/composite room
- Speech/language services were received by 11.9% of the sample
- Vocational education was provided to 53% of the sample
- Nearly one-half received services from Vocational Rehabilitation
- One-fifth received services from the Bureau of Mental Retardation
- Just over one-half attended regional vocational education programs
- Nearly one-third participated in cooperative education or on the job training as part of their educational programs
- Three-quarters graduated from high school with a diploma

Findings

An overview of the results of the pilot survey are provided here within the major categories from the survey. One of the pilot survey questions asked students what they wished their high schools would have done differently. A sampling of the responses to this question appear in Table 4.

Table 4

Thinking about your life now that you are out of high school, is there anything you wish your high school program would have done differently or better?

- Have more people come in (guest lecture) and talk to kids about drugs
- More mainstreaming
- To get my basic skills: reading and comprehension
- I liked what my high school did for me, I have no problems what so ever with my life now that I'm out of high school
- There are a lot of teachers who do a poor job teaching, they're just there putting in time, you are a number to them
- Make short appointments for students on a rotating basis
- I wish school had prepared me more for getting out, I didn't know what to do, nobody had me think about it while I was still in school
- Teachers need more time to help kids, teachers are too busy, both regular and special education teachers
- They should pressure kids more, so they take school more seriously
- Should help students to be able to live on their own, find jobs, and keep them, how to budget their money
- Have better special education teachers who didn't have an attitude problem, and didn't have teachers who discriminated against special education students
- Didn't like it that the student council didn't represent everyone in school, didn't ask for other's opinions
- Didn't prepare me for college, I needed courses to get ready for college courses
- Should have pushed college more
- Better help with adjustment to independence that comes after school.
- I wish I could have been a Co-Op student my senior year
- Not lie about college and really get you ready for it

LIVING STATUS

- Over three-quarters of those responding currently live with parents or relatives
- Just over one-half indicated that their current living situation was not where they wanted to live
- Nearly all those stated a preference to be living independently with friends or spouse
- Just under one-third use their own checking accounts
- Just under two-thirds use their own savings accounts
- The major sources of income to pay for living expenses were job (72.3%), parents (44.6%) and social security (18.5%).
- Over one-half pay all or most of their own bills
- Respondents with learning disabilities were more likely not be living with their parents
- Support services were received by Vocational Rehabilitation and/or the Department of Mental Health and Mental Retardation
- Budgeting was the most frequently cited skill respondents (28.3%) wished they had learned in high school to help with their day-to-day living

EMPLOYMENT STATUS

- Two-thirds indicated that they were working
- The most frequently cited (23.3%) type of job held was food service
- Of those employed, just over one-quarter worked 40 or more hours/week, just under one-half work 20-39 hours and just under one-quarter work less than 20 hours/week
- Nearly two-thirds earn more than minimum wage
- Only three respondents earn less than minimum wage
- More than one-half of those employed receive no sick leave, vacation, health insurance or retirement benefit
- Overall, respondents liked their job, their boss and their co-workers

- Overall, respondents believed they had received enough math and reading to perform their jobs
- More female respondents were working than males
- Males tended to earn higher wages than females
- Respondents who participated in vocational education were more likely to be employed
- Those who did not participate in vocational education tended to earn higher wages
- A substantial majority (82.8%) indicated that transportation was not a problem for them
- Of those who cited transportation problems getting to work, finding work and keeping work were problems

POST SECONDARY EDUCATION STATUS

- Twelve respondents (17.9%) were currently enrolled in school
- Seventy-eight percent indicated that they had participated in other training or education related services since leaving high school
- Females were more likely to be in school
- Nearly one-third of respondents placed in a regular class or resource room were in school.
- No students placed in a resource/composite or self contained class were in school

RECREATION/LEISURE STATUS

- Most respondents participate in recreation/leisure activities on a regular basis
- Over one-half participate in activities outside home or get together with friends more than once a week
- The most frequently cited free time activities were visiting with friends or relatives, watching television, going to movies, dances and malls
- Males participate in recreation/leisure activities more frequently than females

Limitations

Although the school districts participating in this study were selected to represent a balance of size and geographic distribution within our state, they are not necessarily representative of all school districts in the state. Accordingly, the results of the survey should not be interpreted to be a description of all students with disabilities transitioning from school to the community. In addition, the information collected provides only a "snapshot" of one exiting class contacted at one point in time.

Information collected for or by participating school districts through this pilot project is, therefore, not intended to be generalized to all individuals with disabilities exiting high school in Maine. The information, however, should provide educators and policy makers with meaningful outcome information on these individual students. Comparative analysis within a school district will begin to become more valuable over time as the total number of respondents increases.

RECOMMENDATIONS FOR CONDUCTING THE SURVEY: A "HOW - TO" GUIDE

The intent of this pilot project was to design, develop and field test a survey instrument that would be made available to all Maine school districts for the purpose of following their graduates with disabilities who received special education supports. This section will outline strategies and "tips" for using the accompanying materials (Exit Data Summary Sheet, Outcome Surveys, and the Computerized Data Management System).

Exit Data Summary Sheet

In the spring of the student's final year of school an **EXIT DATA SUMMARY SHEET** should be completed. This is most easily completed by the special education teacher or case manager, special education director or guidance counselor. The student may assist with its completion. It is important that each question be answered. Information should be as complete and accurate as possible in order to increase the likelihood of locating the student in the future. Some districts may choose to complete the form at the student's exit PET in the spring of their senior year.

Once the form is completed it should be filed with a copy of the student's transcript and his/her final IEP and/or Individual Transition Plan, if available. It may be helpful to create an **OUTCOMES STUDY FILE** that is separate and distinct from the cumulative files.

An **EXIT DATA SUMMARY SHEET** should be completed for all students with disabilities who have completed their school experience. This

includes students with disabilities who dropped out of school at any point during the school year.

Preparation for Conducting the Survey

The first task necessary is making the decision as to which version of the survey will be used. There are pros and cons to both the phone and mail versions. Using the phone version requires a larger investment of staff time but appears to yield a significantly greater response rate. Using the mail version requires less staff time but yields a much lower response. Some students, due to their disability, may require modification to participate in either the phone or the mail version of the outcomes study. This information should be identified on the Exit Data Summary Sheet and accommodations provided. For other students a phone may be unavailable. Therefore, it will most likely be necessary to use a combination of the two versions.

Once the decision has been made as to which version of the survey is to be used a timeline should be established and responsibilities assigned. When will the survey be conducted? Who will conduct the survey? Will you survey graduates every year? Will you survey graduates every other year?

Approximately one month before you plan to conduct the survey a letter should be sent to former students to explain the survey and advising them that they will be contacted shortly. Use this opportunity to encourage their participation. Let them know that their participation is valuable. In the letter be sure to provide the name and phone number of someone at the school who will be available to answer any questions former graduates or their family may have about the survey.

Conducting the Survey

Whoever is assigned the task of conducting the survey should have ready access to the Outcomes Survey Files. The surveys must be photocopied and readied for use. Once the decision is made regarding the survey version to be used a **STUDENT OUTCOMES SURVEY COMPLETION FORM** should be placed in each file. This form should contain the following information: Name and phone number, date of school exit, any modifications that may be required, and which survey version will be used.

The Student Outcomes Survey Completion Form allows the surveyor to keep a record of the survey process. When was the survey mailed? When was the survey returned? When was the student phoned? When was the phone survey completed? This form proved to be invaluable during the pilot survey process.

The phone surveys averaged approximately twelve minutes. This met the test of "useability" requested by directors and Advisory Panel members. Teachers from one district who conducted their own pilot survey were reported to enjoy the task and the opportunity to reconnect with their former students. Table 5 provides additional tips that were found to be helpful during the course of conducting the pilot survey.

Using the Computerized Data Management System

The **COMPUTERIZED DATA MANAGEMENT SYSTEM** was designed to allow districts to synthesize the information which is gathered by the survey. An instruction manual accompanies the MAC and DOS versions provided. Please refer to the instruction manual for directions in its use.

Table 5

Tips for Conducting the Survey

- Stress that the survey will take only 10 to 15 minutes
- Be clear about the purpose of the survey: It is to get the students advice on the quality of their high school program. Avoid conveying a sense of "testing" whether or not the student is successful in life
- Become familiar with the questionnaire, this will cut down on survey time
- Decide before hand the lengths to which you will go to in order to find the student if the phone number/address you have is incorrect
- If a student is unsure of whether or not they want to participate, try suggesting they begin the survey with you, but can stop at anytime if they choose to
- Avoid being so overly friendly that the student will be hesitant to give any honest negative responses
- Before you begin, decide upon your policy on who is the preferred respondent. For example:
 - Do you want to suggest that the student can "try it" even when a family member says "why don't I just do it with you?"
 - Do you want the student to be the respondent even if you can't be positive that their answers (such as where do you get your money, SSI etc.) are absolutely accurate?
 - If another person will be the respondent, decide if personal opinion questions should still be asked of the student

The synthesis provides a compilation of needs that remain unmet for former students. This was designed to afford collaboration with local transition coordination efforts. This information should be shared (it will be formulated without compromising the confidentiality of former students) with the local funded Committee on Transition projects in order to aid in their efforts to advocate with adult service agencies for services and supports required by youth with disabilities in transition.

SUMMARY

Evaluating what happens to students after they exit school is an important part of the transition process (Evans Getzel & Gugerty, 1992). In collecting information on the outcomes of youth with disabilities school administrators will gain valuable information on the programs and supports provided to these youth while they are in school. Such continual evaluation assists in program review and modification and may increase the likelihood that youth with disabilities are best prepared for life as adults in our communities. Without formal efforts to assess postschool status school administrators are unable to respond to the curricular and transition needs of youth.

All localities must be committed to tracking their own students so that problems and issues can be identified and addressed (Hess, 1992). Follow-up studies allow schools to look within themselves and to assess available resources. Follow-up studies can foster collaboration with local transition coordination efforts throughout the state as well as with representatives from adult service agencies who become responsible for meeting the needs of youth with disabilities once they complete their public school education. Follow-up studies give former students an opportunity to reflect on their experiences and to provide valuable information to educational policy makers committed to school improvement efforts.

The literature available on postschool outcomes for youth with disabilities is disheartening: it appears that we have not been successful in preparing these youth for meaningful and productive lives as adults in our communities. The collaboration of participating school districts, local transition projects, and the Maine Department of Education, the Bureau of Rehabilitation and the Bureau of

Mental Retardation were sought and valued during the course of the project year. These critical and important contributions have assured that the project has created a meaningful and useful product. It is our hope that we have provided the means by which Maine school officials can begin to assess the status of their graduates and to use this information to undertake a critical review of their program and support offerings to assure that all Maine youth enjoy smooth transitions to meaningful and successful lives as adults in our communities.

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APPENDIX A

STUDENT OUTCOMES SURVEY

- **Phone Version**
- **Mail Version**

CODE #: _____

STUDENT OUTCOMES SURVEY: STUDYING THE TRANSITION FROM SCHOOL TO THE COMMUNITY

[First, establish that you are talking to the person you want.]

Hello, this is _____.

I am calling from/for _____ High School.

I am calling because we want to understand how our former students are doing now that they are out of high school, and how our high school's special education services have helped them. We want to find out what we can do to improve our services.

A letter was sent to you from the special education director in the school district you were in last year. The letter explains this survey. Did you receive the letter? [If no, explain the purposes of the survey.]

The questions I need to ask should take about 10 to 15 minutes. This means that it will be confidential. You can refuse to participate in this survey or you can skip any question you do not feel comfortable answering.

Do you think you could do this now?

[If it is not a good time then please reschedule.]

When would be a good time? _____. Okay, I'll call back then. Thank you.

[If it is an acceptable time then please continue with the survey.]

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INFORMATION ABOUT EMPLOYMENT

I'd like to start by asking some questions about work, school, and your (___'s) day-to-day living. First, I'd like to ask you some questions about you (___'s) and work.

1. Do you (does___) have a paying job? If so, are you (is___) PART-TIME, FULL-TIME, OR IN THE MILITARY? [Check one only.]

<input type="checkbox"/> unemployed for now	[Go to question #2.]
<input type="checkbox"/> in the military	[Skip questions #1-7, go to question #8.]
<input type="checkbox"/> working for pay at a full-time job	[Skip questions #1-7, go to question #8.]
<input type="checkbox"/> working for pay at a part-time job	[Skip questions #1-7, go to question #8.]

[IF THEY ARE NOT WORKING at this time in their life the interviewer should proceed with question #2.]

[IF THEY ARE WORKING the interviewer should proceed with question #8 on page 3.]

2. There are a lot of reasons why people aren't working. Can you tell me why, at this time, you are (___is) not working?

[If no response, prompt and check all that apply.]

☐ going to school
☐ looking for work
☐ not able to find work
☐ not interested in working
☐ not able to get child care
☐ not able to find transportation
☐ need more skills or training
☐ decided to be a full-time homemaker
☐ not willing to give up current benefits
☐ not able to work because of health problems
☐ other (specify) _____

3. Have you (Has___) worked at all since leaving high school?

[Check one only.]

☐ YES [Go to next question.]
☐ NO [Go to question # 7.]

4. Have you (Has___) had more than one job since you have (___has) been out of high school?

☐ YES [Go to next question.]
☐ NO [Go to question # 7.]

5. [If YES,] How many jobs have you (has___) had?

[Write in the number of jobs the student has had.]

___ jobs

6. Have you (Has ___) worked MOSTLY FULL-TIME OR MOSTLY PART-TIME?

[Check one only.]

- ☐ Full-time
☐ Part-time

7. Are there certain skills you wish you (___) had learned in high school that would help you (___) find and keep a job? [If no response, prompt check all that apply.]

- ☐ math
☐ reading
☐ computer skills
☐ how to find a job
☐ getting along with others
☐ other (specify) _____
☐ none

[If currently not working, skip questions #8-29 and go to question #30 on page 7.]

CURRENT JOB INFORMATION

Now, I would like to ask you some questions about your current job.

8. What is your (___'s) job? [Prompt if necessary and check one.]

- ☐ professional (teacher, lawyer); managerial; sales worker
☐ clerical worker (secretary, postal clerk)
☐ craft worker (carpenter, plumber)
☐ operative (service station attendant, cashier)
☐ laborer (lawn mowing, grounds keeping, stocking shelves)
☐ janitor/maid
☐ food service
☐ child care/baby sitting
☐ other (specify) _____

9. How many hours do you (does ___) work per week?

[If hours vary, ask for an estimate of the average.]

- ☐ less than 10 hours per week
☐ 10 - 20 hours per week
☐ 21 - 40 hours per week
☐ more than 40 hours per week

10. We would like to know a little about how much money you make (___ makes). Do you make MINIMUM WAGE (\$4.25 AN HOUR), LESS THAN MINIMUM WAGE, or MORE THAN MINIMUM WAGE? [Check only one.]

- ☐ less than minimum wage
☐ minimum wage
☐ more than minimum wage

11. How many months have you (has___) been working at this job?

[If not sure, ask for estimate to nearest month.]

- ☐ 0 - 6 months
☐ 7 - 12 months
☐ more than 12 months

12. Some jobs provide fringe benefits to employees. Do you (Does___) receive any of the following benefits with your (___'s) job?

[Check one for each benefit.]

paid sick leave	<input type="checkbox"/>	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	DON'T KNOW
paid vacation	<input type="checkbox"/>	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	DON'T KNOW
health insurance	<input type="checkbox"/>	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	DON'T KNOW
retirement/pension	<input type="checkbox"/>	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	DON'T KNOW

13. How much do you (does___) like your (___'s) job? Would you say that you like (___likes) it SOMEWHAT, A LITTLE, VERY MUCH, or NOT AT ALL?

[Check one only.]

- ☐ somewhat
☐ a little
☐ very much
☐ not at all

14. How well do you (does___) get along with the people you (___) work with? Would you say SOMEWHAT, A LITTLE, VERY MUCH, or NOT AT ALL?

[Check one.]

- ☐ somewhat
☐ a little
☐ very much
☐ not at all

15. How well do you (does___) get along with your (___'s) boss/supervisor? Would you say SOMEWHAT, A LITTLE, VERY MUCH, or NOT AT ALL?

[Check one only.]

- ☐ somewhat
☐ a little
☐ very much
☐ not at all

16. What has been the hardest part of your (___'s) job?

[If no response, prompt and check only one.]

- ☐ math
- ☐ reading
- ☐ nothing has been hard
- ☐ getting there/transportation
- ☐ getting along with the people I work with
- ☐ other, please specify _____

17. What, if anything, has your (___'s) supervisor/boss asked you (___) to improve on?

[If no response, prompt and check all that apply.]

- ☐ my math
- ☐ asking for help
- ☐ reading skills
- ☐ following directions
- ☐ getting along with the people I work with
- ☐ other, please specify _____
- ☐ nothing

18. Do you think you (___) learned enough reading to do your (___'s) job well?

[Check one only.]

- ☐ YES
- ☐ NO

19. Do you think you (___) learned enough math to do your (___'s) job well?

[Check one only.]

- ☐ YES
- ☐ NO

20. Now that you are (___is) working, are there any skills that you wish you (___) had learned or learned better in high school that could improve how well you (___does) do your (___'s) job now?

[If no response, prompt and check all that apply.]

- ☐ computer skills
- ☐ better math skills
- ☐ getting along with others
- ☐ better reading skills
- ☐ other (specify) _____
- ☐ none

21. Do you (Does___) use or have any special supports on this job like a job coach or subsidized pay because of different or special needs ?
[Check one only.]

___ YES [Go to next question.]

___ NO [Skip question #22, go to question #23.]

22. [If YES,] What types of special supports do you (does___) receive?
[If no response, prompt and check all that apply]

___ job coach

___ subsidized pay

___ adaptive equipment

___ co-worker or employer support

___ other (specify) _____

23. Are there any special job related supports that you think you should have because of different or special needs that you are (___is) not receiving?
[Check one only.]

___ YES (specify) _____

___ NO

24. Do you (Does___) use adaptive equipment for special needs (like a wheel chair or computer)?
[Check one only.]

___ YES [Go to next question.]

___ NO [Skip question #25, go to question #26.]

25. [If YES,] Please describe. _____

26. Is there any special adaptive equipment you think you should have because of special needs?
[Check one only.]

___ YES (specify) _____

___ NO

27. Did anyone help you (___) get this job?

___ YES [Go to next question.]

___ NO [Skip question #28, go to question #29.]

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28. [If YES,] Who helped you (___) get this job?

[If no response, prompt and check all that apply.]

- ☐ friend
- ☐ relative
- ☐ job service
- ☐ social worker
- ☐ college placement
- ☐ JTPA/summer youth
- ☐ mental health agency
- ☐ teacher or counselor
- ☐ school placement staff
- ☐ adult education program
- ☐ vocational rehabilitation

29. How do you (Does___) usually get to work?

[Prompt if necessary and check one only.]

- ☐ taxi
- ☐ you drive
- ☐ walk/ride bike
- ☐ relative or friend
- ☐ car pool/co-worker
- ☐ public transportation
- ☐ transit for those with special needs
- ☐ other (specify) _____

30. Have you (Has___) received any work related services like vocational evaluations or job training since you (___) left high school?

[Check one only.]

- ☐ YES [Go to next question.]
- ☐ NO [Skip questions #31 & 32, go to question #33.]

31. [If YES,] What kind of work related services have you (has___) received?

[Prompt if necessary and check all that apply.]

- ☐ job training
- ☐ job placement
- ☐ counseling/therapy
- ☐ testing/evaluation
- ☐ legal/advocacy services
- ☐ pre-vocational training
- ☐ job support such as extra training

32. Who provided these services?

[Prompt if necessary and check all that apply.]

- ☐ JTPA/summer youth
- ☐ job service
- ☐ don't know
- ☐ adult education
- ☐ vocational rehabilitation
- ☐ department of human services
- ☐ community mental health center
- ☐ department of mental health/mental retardation

33. Are there any work related services you think you should have because of special needs?

[Check one only.]

- ☐ YES (specify) _____
- ☐ NO

34. Now, I'd like to ask you about your (___'s) future work goals. What do you (does___) want to be doing in the future?

[Prompt if necessary and check one only.]

- ☐ not work
- ☐ find work
- ☐ get promoted
- ☐ stay in this job/similar job
- ☐ do something different/better
- ☐ get more training for another job
- ☐ go to college for a career

LIVING INFORMATION

Now I would like to ask you a few questions about your (___'s) day to day living.

35. Who do you (does___) live with?

[Prompt if necessary and check one only.]

- ☐ group home
- ☐ foster home
- ☐ school dormitory
- ☐ with parents or relatives
- ☐ intermediate care facility
- ☐ supervised apartment or supported living
- ☐ independent home/apartment
- ☐ other (specify) _____

36. Is this where you (___ wants) want to live?

[Check one only.]

___ YES [Skip question #37, go to question #38.]

___ NO [Go to next question.]

37. [If **NO**,] Where do you (does ___) want to be living?

[Prompt if necessary and check one only.]

___ group home

___ foster home

___ school dormitory

___ with parents or relatives

___ intermediate care facility

___ supervised apartment or supported living

___ independent home/apartment

___ other (specify) _____

38. Do you (Does ___) use your (___'s) own checking account?

[Check one only.]

___ YES

___ NO

39. Do you (Does ___) use your (___'s) own savings account?

[Check one only.]

___ YES

___ NO

The next few questions are more specific questions about your personal finances. I want to remind you again that you can choose not to answer. *You can just pass.*

40. People need money to pay for living expenses such as housing, food, clothing, health care, etc. I'm going to read a list of sources of money that people use to pay for their living expenses. Please tell me which of these sources provide money for your (___'s) living expenses.

[Read list, check all that apply.]

___ parents

___ your job

___ don't know

___ other relatives

___ unemployment benefits

___ Social Security (SSI, SSDI)

___ public programs (AFDC, Food Stamps)

41. Do you (Does___) pay ALL OF YOUR (___'s) OWN BILLS, MOST OF YOUR (___'s) OWN BILLS, or A FEW OF YOUR (___'s) OWN BILLS, or NONE OF YOUR OWN BILLS?
[Check one only.]

- ___ all of my own bills [Skip question #42 and go to question #43.]
- ___ most of my own bills [Go to next question.]
- ___ a few of my own bills [Go to next question.]
- ___ none of my own bills [Go to next question.]

42. If you don't pay all of your own bills, who else pays your (___'s) bills for you (___)?
[Prompt if necessary and check one only.]

- ___ parents
- ___ friends
- ___ other relatives
- ___ others (specify) _____

The next few questions are about health services. These are also optional. You can choose not to answer any question you are not comfortable answering.

43. Since you (___has) have left high school, have you (___) received any health related services like physical therapy?
[Check one only.]

- ___ YES [Go to next question.]
- ___ NO [Skip questions #44 & 45. go to question #46.]

44. [If YES,] What kind of health related services have you (has___) received?
[Prompt if necessary and check all that apply.]

- ___ testing/evaluation
- ___ counseling/therapy
- ___ adaptive equipment
- ___ mental health services
- ___ physical/occupational therapy
- ___ medical

45. Who provided these services?
[Prompt if necessary and check all that apply.]

- ___ JTPA/summer youth
- ___ job service
- ___ don't know
- ___ vocational rehabilitation
- ___ department of human services
- ___ community mental health center
- ___ department of mental health/mental retardation
- ___ doctor/physician

46. Are there any health related services that you think you should have because of special needs? [Check one only.]

☐ YES (specify) _____
☐ NO

These next few questions are about community living.

47. Since you have (___has) left high school, have you (has___) received any community living related services because of special needs such as help in learning to live on your own or financial assistance? [Check one only.]

☐ YES [Go to next question.]
☐ NO [Skip questions #48 & 49, go to question #50.]

48. If YES, what kind of community living related services have you (has___) received?
[Prompt if necessary and check all that apply.]

☐ financial assistance
☐ living skills training
☐ finding living arrangements
☐ legal/advocacy services
☐ other, (specify) _____

49. Who provided these services?
[Prompt if necessary and check all that apply.]

☐ don't know
☐ vocational rehabilitation
☐ department of human services
☐ community mental health center
☐ department of mental health/mental retardation

50. Are there any community living related services you think you should have because of special needs? [Check one only.]

☐ YES (specify) _____
☐ NO

51. Do you have any transportation problems in getting to and from where you want to go?
[Check one only.]

☐ YES [Go to next question.]
☐ NO [Skip questions #52, go to question #53.]

52. [If YES,] for which of the following is transportation a problem?

[Read and check all that apply.]

- ☐ getting to school or training programs
- ☐ getting health services/medical assistance
- ☐ getting to work or finding work and keeping work
- ☐ getting about town to meet my daily needs (shopping, banking, etc.)
- ☐ getting out of the home to be with friends or to participate in social events
- ☐ other (specify) _____
- ☐ none of the above is a transportation problem

53. Are there any transportation services you think you should have because of special needs?

[Check one only.]

- ☐ YES (specify) _____
- ☐ NO

54. I'm going to read a list of things that people do in their spare time. Please tell me which of these you do (___does) in your (___'s) free time.

[Read and check all that apply.]

- ☐ read
- ☐ play sports
- ☐ don't have free time
- ☐ "hanging out"
- ☐ volunteer work
- ☐ "driving around"
- ☐ listening to music
- ☐ watch television
- ☐ church activities
- ☐ go to movies, dances, the mall
- ☐ visit with friends or relatives
- ☐ club activities (Lions, Jaycees, etc)
- ☐ hobbies (gardening, sewing, collecting)
- ☐ outdoor activities (hiking, camping, fishing)
- ☐ other (specify) _____

55. How often do you (does ___) do activities outside your (___'s) home, such as dances, movies, sports events, etc.?

[Prompt if necessary and check one only.]

- ☐ rarely or never
- ☐ about once a month
- ☐ a couple of times a month
- ☐ about once a week
- ☐ more than once a week

56. About how often do you (does___) get together with friends?

[Prompt if necessary and check one only.]

- ☐ rarely or never
- ☐ about once a month
- ☐ a couple of times a month
- ☐ about once a week
- ☐ more than once a week

The next few questions are about problems or difficulties that many people have, and where you (___turns) turn for help with your (___'s) problems.

57. Are any of the following a problem or difficulty for you (___)?

[Read and check all that apply.]

- ☐ health
- ☐ loneliness
- ☐ lack of money
- ☐ transportation
- ☐ making friends
- ☐ lack of work skills
- ☐ not enough leisure time
- ☐ your behavior (such as anger, self-control)
- ☐ other (specify) _____
- ☐ none of the above are problems/difficulties

58. When you have (___has) a problem, who do you (does___) go to for help?

[If no response, prompt and check all that apply.]

- ☐ no one
- ☐ spouse
- ☐ minister, priest, or rabbi
- ☐ parent(s) or other relative
- ☐ friend, boyfriend or girlfriend
- ☐ counselor, psychologist, or social worker, etc.
- ☐ other (specify) _____

59. Are there certain skills you wish you (___) had learned in high school to help you with your day-to-day living?

[Prompt and check all that apply.]

- ☐ shopping
- ☐ budgeting
- ☐ being a good parent
- ☐ dealing with personal problems
- ☐ using a checking/savings account
- ☐ other (specify) _____
- ☐ none of the above

QUESTIONS ABOUT HIGH SCHOOL AND POST-SECONDARY TRAINING

Now I would like to ask you a few questions about any training you have (___has) had since high school.

60. Are you (is___) currently in school?

[Check one only.]

___ YES [Go to next question.]

___ NO [Go to question #65.]

61. [If YES,] Are you (is___) a part-time or full-time student?

[Check one only.]

___ PART-TIME

___ FULL-TIME

62. What type of a school do you attend?

[Check one only.]

GED program _____

adult education _____

college/2 year program _____

college/4 year program _____

vocational or technical school _____

post graduate high school program _____

other (specify) _____

63. Who helped you (___) get into this program?

[Prompt if necessary and check all that apply.]

___ JTPA/summer youth

___ friend

___ no help

___ social worker

___ college counselor

___ parent or relative

___ high school counselor

___ vocational rehabilitation

___ other (specify) _____

64. Do you (Does___) have any special educational supports such as a tutor?

[Check one only.]

___ YES (specify) _____

___ NO

65. Have you (Has ___) received any education related services such as vocational counseling since you (___) left high school?
[Check one only.]

___ YES [Go to next question.]

___ NO [Go to question #68.]

66. [If YES,] What kind of education related services have you (has ___) received?
[Prompt if necessary and check all that apply.]

___ testing/evaluation

___ counseling/therapy

___ financial assistance

___ legal/advocacy service

67. Who provided these services?

[Prompt if necessary and check all that apply.]

___ JTPA/summer youth

___ don't know

___ job service

___ adult education

___ vocational rehabilitation

___ department of human services

___ community mental health center

___ department of mental health/mental retardation

68. Are there any education related services you think you should be receiving because of different or special needs? [Check one only.]

___ YES (specify) _____

___ NO

69. Have you (Has ___) received any other education or training since you (___) left high school?
[Check one only.]

___ YES [Go to next question.]

___ NO [Go to question #72.]

70. [If **YES**,] Where did you () receive this education or training and did you () complete the program? [Prompt if necessary and check all that apply.]

PROGRAM	TOOK PART	COMPLETED
JTPA/summer youth	_____	_____
Job Corps	_____	_____
GED program	_____	_____
adult education	_____	_____
college/2 year program	_____	_____
college/4 year program	_____	_____
vocational or technical school	_____	_____
post graduate high school program	_____	_____
other (specify) _____		

REASON FOR NOT COMPLETED: _____

71. Who helped you () get into this program?
[Prompt if necessary and check all that apply.]

- _____ JTPA/summer youth
- _____ friend
- _____ no help
- _____ social worker
- _____ college counselor
- _____ parent or relative
- _____ high school counselor
- _____ vocational rehabilitation
- _____ other (specify) _____

72. When you () was) were in high school, did you () participate in any extra-curricular activities like sports, band or other clubs?
[Check one only.]

- _____ YES [Go to next question.]
- _____ NO [Skip question #73, go to question #74.]

73. [If **YES**,] Which ones?
[Prompt if necessary and check all that apply.]

- _____ sports
- _____ drama/theater
- _____ band/orchestra
- _____ chorus/glee club
- _____ student government
- _____ vocational clubs (future homemakers, business, etc.)
- _____ other (specify) _____

74. Which one of your (___'s) high school classes, programs or activities was most helpful to you (___)? [Prompt if necessary and check one only.]

- ☐ none
- ☐ vocational programs
- ☐ special education (resource room, speech/language, etc)
- ☐ mainstream academic courses (math, english, science, etc.)
- ☐ other (specify) _____

75. Was there one particular person during school who was most helpful to you (___)?
[Prompt if necessary and check one only.]

- ☐ no one
- ☐ classmate
- ☐ school principal
- ☐ guidance counselor
- ☐ school psychologist
- ☐ special education teacher
- ☐ regular education teacher
- ☐ other (specify) _____

[The following question is not to be asked of the respondent, but answered by the interviewer.]

76. *Interviewer: did someone other than the student complete the interview?*

[Check one only.]

- ☐ YES [Skip question #77, go to question #78.]
- ☐ NO [Go to next question.]

77. How difficult was it for you to complete this survey by yourself?
[Check one only.]

- ☐ very difficult
- ☐ a little difficult
- ☐ not difficult at all

GENERAL QUESTIONS

The last few questions are about your (___'s) marital status and whether or not you have (___has) children. These are optional and you do (___does) not have to answer any of them.

78. Which of the following describes your (___'s) marital status? Are you (is ___):
[Prompt if necessary and check one only.]

- ☐ single
- ☐ married
- ☐ widowed
- ☐ divorced or separated

79. Do you (Does___) have any children? [Check one only.]

___ YES [Go to next question.]

___ NO [Skip questions #80 & 81, go to question #82.]

80. [If **YES**,] How many children do you (does___) have?
[Write answer in space below.]

___ children

81. Do your (Does___'s) children live with you (___)?
[Check one only.]

___ YES

___ NO

CLOSING: i have two final questions.

82. Overall, how satisfied are you with what high school did to help you (___) adjust to adult life?
Would you say you (___is) are VERY SATISFIED, SATISFIED, DISSATISFIED, OR VERY
DISSATISFIED. [Check only one.]

___ very satisfied

___ satisfied

___ dissatisfied

___ very dissatisfied

83. Thinking about your (___'s) life now that you are (___is) out of high school, is there anything
you wish your (___'s) high school program would have done differently or better?
[Briefly note their comments.]

**This completes our survey. Thank you for helping us. Remember, your answers
will help us plan better programs for high school students.**

Studying the Transition From School to the Community Student Outcomes Survey

This questionnaire has been developed as part of a study of what students have been doing since they left high school and how our high school's special education services have helped them. The purpose of the study is to help the high school develop programs that will better meet the needs of its students after they leave school. Because you have recently left school, your responses will be very important.

The questionnaire asks questions about work, school and your day-to-day living. Completing the questionnaire should take about thirty minutes. If you feel you need help completing the questionnaire, please ask a friend or relative for help. After you have answered the questions, please return the questionnaire in the postage-paid envelope provided.

Your participation in this study is completely voluntary. You do not have to complete the questionnaire. If you do not know the answer to a question, you do not have to respond to the question. If you do not want to answer a particular question, you can leave it blank and move on to the next question. Your answers will be kept confidential.

The results of the study will be used to help school officials improve the programs offered at school. Your responses will help the school to better prepare students for life after school. Thank you in advance for completing the questionnaire and your help in improving the school's programs.

This material was produced by The Center for Community Inclusion, Maine's UAP, University of Maine with funds awarded by the Committee on Transition, through its federal School-to-Community Transition Systems Change Project for Youth with Disabilities.

Thank you for agreeing to help us. This questionnaire asks some questions about work, school, and your day-to-day living. First, we'd like to ask you some questions about you and work.

1. Do you have a paying job? If so, are you PART-TIME, FULL-TIME, OR IN THE MILITARY?

[Check one only.]

- | | |
|---|---|
| <input type="checkbox"/> unemployed for now | [Go to Question #2.] |
| <input type="checkbox"/> in the military | [Skip Questions #1-7, go to Question #8.] |
| <input type="checkbox"/> working for pay at a full-time job | [Skip Questions #1-7, Go to Question #8.] |
| <input type="checkbox"/> working for pay at a part-time job | [Skip Questions #1-7, go to Question #8.] |

2. There are a lot of reasons why people aren't working. Can you tell us why, at this time you are not working?

[Check all that apply.]

- | | |
|---|--|
| <input type="checkbox"/> going to school | <input type="checkbox"/> not able to find transportation |
| <input type="checkbox"/> looking for work | <input type="checkbox"/> need more skills or training |
| <input type="checkbox"/> not able to find work | <input type="checkbox"/> decided to be a full-time homemaker |
| <input type="checkbox"/> not interested in working | <input type="checkbox"/> not willing to give up current benefits |
| <input type="checkbox"/> not able to get child care | <input type="checkbox"/> not able to work because of health problems |
| <input type="checkbox"/> other (specify) _____ | |

3. Have you worked at all since leaving high school?

[Check one only.]

- ☐ YES [Go to next question.] ☐ NO [Go to question #7]

4. Have you had more than one job since you have been out of high school?

[Check one only.]

- ☐ YES [Go to next question] ☐ NO [Go to question #7.]

5. If YES, how many jobs have you had?

[Write in the number of jobs in the space below.]

____ jobs

6. Have you worked mostly FULL-TIME or mostly PART-TIME?

[Check one only.]

- ☐ Full-time ☐ Part-time

7. Are there certain skills you wish you had learned in high school that would help you find and keep a job?

[Check all that apply.]

- | | |
|--|--|
| <input type="checkbox"/> math | <input type="checkbox"/> getting along with others |
| <input type="checkbox"/> reading | <input type="checkbox"/> other (specify) _____ |
| <input type="checkbox"/> computer skills | <input type="checkbox"/> none |
| <input type="checkbox"/> how to find a job | |

[If currently not working, skip Questions #8-29 and go to Question #30 on page 4.]

Now, we would like to ask you some questions about your current job.

8. What is your job?

[Check one only.]

- ☐ professional (teacher, lawyer; managerial; sales worker)
- ☐ clerical worker (secretary, postal clerk)
- ☐ craft worker (carpenter, plumber)
- ☐ operative (service station attendant, cashier)
- ☐ laborer (lawn mowing, grounds keeping, stocking shelves)
- ☐ janitor/maid
- ☐ food service
- ☐ child care/baby sitter
- ☐ other (specify) _____

9. How many hours do you work per week?

[If hours vary, give an estimate of the average.]

- ☐ less than 10 hours per week
- ☐ 10-20 hours per week
- ☐ 21-40 hours per week
- ☐ more than 40 hours per week

10. We would like to know a little about how much money you make. Do you make MINIMUM WAGE (\$4.25 AN HOUR), LESS THAN MINIMUM WAGE, OR MORE THAN MINIMUM WAGE?

[Check one only.]

- ☐ less than minimum wage
- ☐ minimum wage
- ☐ more than minimum wage

11. How many months have you been working at this job? (If not sure, estimate to the nearest month.)

[Check one only.]

- ☐ 0-6 months
- ☐ 7-12 months
- ☐ more than 12 months

12. Some jobs provide fringe benefits to employees. Do you receive any of the following benefits with your job.

[Check one for each benefit.]

- | | | | | | | |
|--------------------|--------------------------|-----|--------------------------|----|--------------------------|------------|
| paid sick leave | <input type="checkbox"/> | YES | <input type="checkbox"/> | NO | <input type="checkbox"/> | DON'T KNOW |
| paid vacation | <input type="checkbox"/> | YES | <input type="checkbox"/> | NO | <input type="checkbox"/> | DON'T KNOW |
| health insurance | <input type="checkbox"/> | YES | <input type="checkbox"/> | NO | <input type="checkbox"/> | DON'T KNOW |
| retirement/pension | <input type="checkbox"/> | YES | <input type="checkbox"/> | NO | <input type="checkbox"/> | DON'T KNOW |

13. How much do you like your job? Would you say that you like it SOMEWHAT, A LITTLE, VERY MUCH, or NOT AT ALL?

[Check one only.]

- ☐ somewhat
- ☐ a little
- ☐ very much
- ☐ not at all

14. How well do you get along with the people you work with? Would you say SOMEWHAT, A LITTLE, VERY MUCH, or NOT AT ALL?

[Check one only.]

- ☐ somewhat
- ☐ a little
- ☐ very much
- ☐ not at all

15. How well do you get along with your boss/supervisor? Would you say SOMEWHAT, A LITTLE, VERY MUCH, or NOT AT ALL?

[Check one only.]

☐ somewhat ☐ very much
☐ a little ☐ not at all

16. What has been the hardest part of your job?

[Check one only.]

☐ math ☐ getting there/transportation
☐ reading ☐ getting along with the people I work with
☐ nothing has been hard ☐ other (specify) _____

17. What, if anything, has your supervisor/boss asked you to improve on?

[Check all that apply.]

☐ my math ☐ getting along with the people I work with
☐ asking for help ☐ other (specify) _____
☐ reading skills ☐ nothing
☐ following directions

18. Do you think you learned enough reading to do your job well?

[Check one only.]

☐ YES ☐ NO

19. Do you think you learned enough math to do your job well?

[Check one only.]

☐ YES ☐ NO

20. Now that you are working, are there any skills that you wish you had learned or learned better in high school that could improve how well you do your job now?

[Check all that apply.]

☐ computer skills ☐ better reading skills
☐ better math skills ☐ other (specify) _____
☐ getting along with others ☐ none

21. Do you use or have any special supports on this job like a job coach or subsidized pay because of different or special needs ?

[Check one only.]

☐ YES [Go to next question] ☐ NO [Skip question #22, go to question #23.]

22. If YES, what types of special supports do you receive?

[Check all that apply]

☐ job coach ☐ co-worker or employer support
☐ subsidized pay ☐ other (specify) _____
☐ adaptive equipment

23. Are there any special job related supports you think you should have because of different or special needs that your are not receiving?

[Check one only.]

☐ YES (specify) _____
☐ NO

24. Do you use adaptive equipment for special needs (like a wheel chair or computer)?

[Check one only.]

☐ YES [Go to next question.]

☐ NO [Skip question #25, go to question #26.]

25. If YES, please describe. _____

26. Is there any special adaptive equipment you think you should have because of special needs?

[Check one only.]

☐ YES (specify) _____

☐ NO

27. Did anyone help you get this job?

[Check one only.]

☐ YES [Go to next question.]

☐ NO [Skip question #28, go to question #29.]

28. If YES, who helped you get this job?

[Check all that apply.]

☐ friend

☐ mental health agency

☐ relative

☐ teacher or counselor

☐ job service

☐ school placement staff

☐ social worker

☐ adult education program

☐ college placement

☐ vocational rehabilitation

☐ JTPA/summer youth

29. How do you usually get to work?

[Check one only.]

☐ taxi

☐ car pool/co-worker

☐ you drive

☐ public transportation

☐ walk/ride bike

☐ transit for those with special needs

☐ relative or friend

☐ other (specify) _____

30. Have you received any work related services like vocational evaluations or job training since you left high school?

[Check one only.]

☐ YES [Go to next question.]

☐ NO [Skip questions #31 & 32, go to question #33.]

31. If YES, which of the following work related services have you received?

[Check all that apply.]

☐ job training

☐ legal/advocacy services

☐ job placement

☐ pre-vocational training

☐ counseling/therapy

☐ job support such as extra training

☐ testing/evaluation

32. Who provided these services?

[Check all that apply.]

☐ JTPA/summer youth

☐ vocational rehabilitation

☐ job service

☐ department of human services

☐ don't know

☐ community mental health center

☐ adult education

☐ department of mental health/mental retardation

33. Are there any work related services you think you should have because of special needs?
[Check one only.]

☐ YES (specify) _____
☐ NO

34. We would like to ask you about your future work goals. What do you want to be doing in the future?

[Check one only.]

<input type="checkbox"/> not work	<input type="checkbox"/> do something different/better
<input type="checkbox"/> find work	<input type="checkbox"/> get more training for another job
<input type="checkbox"/> get promoted	<input type="checkbox"/> go to college for career
<input type="checkbox"/> stay in this job/similar job	

Now we would like to ask you a few questions about your day-to-day living.

35. Who do you live with?

[Check one only.]

<input type="checkbox"/> group home	<input type="checkbox"/> intermediate care facility
<input type="checkbox"/> foster home	<input type="checkbox"/> supervised apartment or supported living
<input type="checkbox"/> school dormitory	<input type="checkbox"/> independent home/apartment
<input type="checkbox"/> with parents or relatives	<input type="checkbox"/> other (specify) _____

36. Is this where you want to live?

[Check one only.]

☐ YES [Skip question #37, go to question #38.] ☐ NO [Go to next question.]

37. If **NO**, where do you want to be living?

[Check one only.]

<input type="checkbox"/> group home	<input type="checkbox"/> intermediate care facility
<input type="checkbox"/> foster home	<input type="checkbox"/> supervised apartment or supported living
<input type="checkbox"/> school dormitory	<input type="checkbox"/> independent home/apartment
<input type="checkbox"/> with parents or relatives	<input type="checkbox"/> other (specify) _____

38. Do you use your own checking account?

[Check one only.]

☐ YES ☐ NO

39. Do you use your own savings account?

[Check one only.]

☐ YES ☐ NO

The next few questions are more specific questions about your personal finances. We want to remind you again that you can choose not to answer. You can just pass.

40. People need money to pay for living expenses such as housing, food, clothing, health care, etc. Below is a list of sources of money that people use to pay for their living expenses. Please check which of these sources provide money for your living expenses.

[Check all that apply.]

- | | |
|--|--|
| <input type="checkbox"/> parents | <input type="checkbox"/> unemployment benefits |
| <input type="checkbox"/> your job | <input type="checkbox"/> Social Security (SSI, SSDI) |
| <input type="checkbox"/> don't know | <input type="checkbox"/> public programs (AFDC, Food Stamps) |
| <input type="checkbox"/> other relatives | |

41. Do you pay ALL OF YOUR OWN BILLS, MOST OF YOUR OWN BILLS, A FEW OF YOUR OWN BILLS, or NONE OF YOUR OWN BILLS?

[Check one only.]

- ☐ all of my own bills [Skip question #42, go to question #43]
☐ most of my own bills [Go to next question]
☐ a few of my own bills [Go to next question]
☐ none of my own bills [Go to next question]

42. If you don't pay all of your own bills, who else pays your bills for you?

[Check one only.]

- | | |
|----------------------------------|---|
| <input type="checkbox"/> parents | <input type="checkbox"/> other relatives |
| <input type="checkbox"/> friends | <input type="checkbox"/> others (specify) _____ |

The next few questions are about health services. These are also optional. You can choose not to answer any question you are not comfortable answering.

43. Since you have left high school, have you received any health related services like physical therapy?

[Check one only.]

- ☐ YES [Go to next question.] ☐ NO [Skip questions #44 & 45, go to question #46.]

44. If YES, what type of health related services have you received?

[Check all that apply.]

- | | |
|---|--|
| <input type="checkbox"/> testing/evaluation | <input type="checkbox"/> mental health services |
| <input type="checkbox"/> counseling/therapy | <input type="checkbox"/> physical/occupational therapy |
| <input type="checkbox"/> adaptive equipment | <input type="checkbox"/> medical |

45. Who provided these services?

[Check all that apply.]

- | | |
|--|---|
| <input type="checkbox"/> JTPA/summer youth | <input type="checkbox"/> department of human services |
| <input type="checkbox"/> job service | <input type="checkbox"/> community mental health center |
| <input type="checkbox"/> don't know | <input type="checkbox"/> department of mental health/mental retardation |
| <input type="checkbox"/> doctor/physician | <input type="checkbox"/> vocational rehabilitation |

46. Are there any health related services that you think you should have because of special needs?

[Check one only.]

- ☐ YES (specify) _____
☐ NO

The next few questions are about community living.

47. Since you have left high school, have you received any community living related services because of special needs such as help in learning to live on your own or financial assistance?

[Check one only.]

☐ YES [Go to next question.]

☐ NO [Skip questions #48 & 49, go to question #50.]

48. If YES, which of the following community living related services have you received?

[Check all that apply.]

☐ financial assistance

☐ finding living arrangements

☐ living skills training

☐ legal/advocacy services

☐ other (specify) _____

49. Who provided these services?

[Check all that apply.]

☐ don't know

☐ community mental health center

☐ vocational rehabilitation

☐ department of mental health/mental retardation

☐ department of human services

50. Are there any community living related services you think you should have because of special needs?

[Check one only.]

☐ YES (specify) _____

☐ NO

51. Do you have any transportation problems in getting to and from where you want to go?

[Check one only.]

☐ YES [Go to next question]

☐ NO [Skip question #52, go to question #53]

52. If YES, for which of the following is transportation a problem?

[Check all that apply.]

☐ getting to school or training programs

☐ getting health services/medical assistance

☐ getting to work or finding work and keeping work

☐ getting about town to meet my daily needs (shopping, banking, etc.)

☐ getting out of the home to be with friends or to participate in social events

☐ other (specify) _____

☐ none of the above is a transportation problem

53. Are there any transportation services you think you should have because of special needs?

[Check one only.]

☐ YES (specify) _____

☐ NO

54. Below is a list of things that people do in their free time. Please check those which you do in your free time.

[Check all that apply.]

- | | |
|---|--|
| <input type="checkbox"/> read | <input type="checkbox"/> church activities |
| <input type="checkbox"/> play sports | <input type="checkbox"/> go to movies, dances, the mall |
| <input type="checkbox"/> don't have free time | <input type="checkbox"/> visit with friends or relatives |
| <input type="checkbox"/> "hanging out" | <input type="checkbox"/> club activities (Lions, Jaycees, etc) |
| <input type="checkbox"/> volunteer work | <input type="checkbox"/> hobbies (gardening, sewing, collecting) |
| <input type="checkbox"/> "driving around" | <input type="checkbox"/> outdoor activities (hiking, camping, fishing) |
| <input type="checkbox"/> listening to music | <input type="checkbox"/> other (specify) _____ |
| <input type="checkbox"/> watch television | |

55. How often do you do activities outside your home, such as dances, movies, sports events, etc.?

[Check one only.]

- | | |
|--|--|
| <input type="checkbox"/> rarely or never | <input type="checkbox"/> about once a week |
| <input type="checkbox"/> about once a month | <input type="checkbox"/> more than once a week |
| <input type="checkbox"/> a couple of times a month | |

56. About how often do you get together with friends?

[Check one only.]

- | | |
|--|--|
| <input type="checkbox"/> rarely or never | <input type="checkbox"/> about once a week |
| <input type="checkbox"/> about once a week | <input type="checkbox"/> more than once a week |
| <input type="checkbox"/> a couple of times a month | |

The next few questions are about problems or difficulties that many people have, and where you turn for help with your problems.

57. Are any of the following a problem or difficulty for you?

[Check all that apply.]

- | | |
|---|--|
| <input type="checkbox"/> health | <input type="checkbox"/> lack of work skills |
| <input type="checkbox"/> loneliness | <input type="checkbox"/> not enough leisure time |
| <input type="checkbox"/> lack of money | <input type="checkbox"/> your behavior (anger, self-control) |
| <input type="checkbox"/> transportation | <input type="checkbox"/> other (specify) _____ |
| <input type="checkbox"/> making friends | <input type="checkbox"/> none of the above are problems/difficulties |

58. When you have a problem, who do you go to for help?

[Check all that apply.]

- | | |
|--|--|
| <input type="checkbox"/> no one | <input type="checkbox"/> friend, boyfriend or girlfriend |
| <input type="checkbox"/> spouse | <input type="checkbox"/> counselor, psychologist, or social worker, etc. |
| <input type="checkbox"/> minister, priest, or rabbi | <input type="checkbox"/> other (specify) _____ |
| <input type="checkbox"/> parent(s) or other relative | |

59. Are there certain skills you wish you had learned in high school to help you with your day-to-day living?

[Check all that apply.]

- | | |
|--|---|
| <input type="checkbox"/> shopping | <input type="checkbox"/> dealing with personal problems |
| <input type="checkbox"/> budgeting | <input type="checkbox"/> using a checking/savings account |
| <input type="checkbox"/> being a good parent | <input type="checkbox"/> other (specify) _____ |
| | <input type="checkbox"/> none of the above |

We would like to ask a few questions about any training you have had since high school.

60. Are you currently in school?

[Check one only.]

☐ YES [Go to next question.] ☐ NO [Go to question #65.]

61. If YES, are you a part-time or full time student? [Check one only.]

☐ PART-TIME ☐ FULL TIME

62. What type of a school do you attend?

[Check one only.]

☐ GED Program ☐ college/4 year program
☐ adult education ☐ vocational or technical school
☐ college/2 year program ☐ post graduate high school program
☐ other (specify) _____

63. Who helped you get into this program?

[Check all that apply.]

☐ JTPA/summer youth ☐ college counselor
☐ friend ☐ parent or relative
☐ no help ☐ high school counselor
☐ social worker ☐ vocational rehabilitation
☐ other (specify) _____

64. Do you have any special educational supports such as a tutor?

[Check one only.]

☐ YES (specify) _____
☐ NO

65. Have you received any education related services such as vocational counseling since you left high school?

[Check one only.]

☐ YES [Go to next question.] ☐ NO [Go to question #68.]

66. If YES, what kind of education related services have you received?

[Check all that apply.]

☐ testing/evaluation ☐ financial assistance
☐ counseling/therapy ☐ legal/advocacy service

67. Who provided these services?

[Check all that apply.]

☐ JTPA/summer youth ☐ vocational rehabilitation
☐ don't know ☐ department of human services
☐ job service ☐ community mental health center
☐ adult education ☐ department of mental health/mental retardation

68. Are there any education related services you think you should be receiving because of different or special needs?

[Check one only.]

☐ YES (specify) _____
☐ NO

69. Have you received any other education or training since you left high school?
[Check one only.]

___ YES [Go to next question.] ___ NO [Go to question #72.]

70. If YES, where did you receive this education or training and did you complete the program?
[Check all that apply.]

<u>PROGRAM</u>	<u>TOOK PART</u>	<u>COMPLETED</u>
JTPA/summer youth	___	___
Job Corps	___	___
GED Program	___	___
adult education	___	___
college/2 year program	___	___
college/4 year program	___	___
vocational or technical school	___	___
post graduate high school program	___	___
other (specify) _____	___	___

REASON FOR NOT COMPLETED: _____

71. Who helped you get into this program?
[Check all that apply.]

___ JTPA/summer youth	___ college counselor
___ friend	___ parent or relative
___ no help	___ high school counselor
___ social worker	___ vocational rehabilitation
___ other (specify) _____	

72. When you were in high school, did you participate in any extra-curricular activities like sports, band or other clubs?
[Check one only.]

___ YES [Go to next question.] ___ NO [Skip question #73, go to question #74]

73. If YES, which ones?
[Check all that apply.]

___ sports	___ chorus/glee club
___ drama/theater	___ student government
___ band/orchestra	___ vocational clubs (future homemakers, business, etc.)
___ other (specify) _____	

74. Which one of your high school classes, programs or activities was most helpful to you?
[Check one only.]

___ none	___ special education (resource room, speech/language...)
___ vocational programs	___ mainstream academic courses (math, english, science...)
___ other (specify) _____	

75. Was there one particular person during school who was most helpful to you?
[Check one only.]

___ no one	___ school psychologist
___ classmate	___ special education teacher
___ school principal	___ regular education teacher
___ guidance counselor	___ other (specify) _____

76. Did someone other than the student complete the interview?

[Check one only.]

☐ YES [Skip question #77, go to question #78.]

☐ NO [Go to next question.]

77. How difficult was it for you to complete this survey by yourself?

[Check one only.]

☐ very difficult

☐ a little difficult

☐ not difficult at all

The following questions are about your marital status and whether or not you have children. These are optional and you do not have to answer any of them.

78. Which of the following describes your marital status? Are you:

[Check one only.]

☐ single

☐ widowed

☐ married

☐ divorced or separated

79. Do you have any children?

[Check one only.]

☐ YES [Go to next question.]

☐ NO [Skip questions #80 & 81, go to question #82.]

80. If YES, how many children do you have?

[Write your answer in the space below].

children

81. Do your children live with you?

[Check one only.]

☐ YES

☐ NO

We have two final questions.

82. Overall, how satisfied are you with what high school did to help you adjust to adult life? Would you say you are VERY SATISFIED, SATISFIED, DISSATISFIED, OR VERY DISSATISFIED.

[Check one only.]

☐ very satisfied

☐ satisfied

☐ dissatisfied

☐ very dissatisfied

83. Thinking about your life now that you are out of high school, is there anything you wish your high school program would have done differently or better? [Briefly note your comments.]

This completes our survey. Thank you for helping us. Remember, your answers will help us plan better programs for high school students.

Please return the completed questionnaire in the postage-paid envelope provided.

APPENDIX B
EXIT DATA SUMMARY SHEET

STUDENT OUTCOMES: STUDYING THE EFFECTIVENESS OF TRANSITION

Summary Sheet Student Exiting Data *To be completed at student's school exit (including drop out)*

Student Name: _____ M _____ F CODE: _____
Date of Graduation/School Exit: _____ Date of Birth: _____ Age: _____

Ethnic Background:

- ☐ Afro-American
- ☐ Asian
- ☐ Hispanic
- ☐ Native American
- ☐ White
- ☐ Other

Home Language:

- ☐ English
- ☐ French
- ☐ Sign Language
- ☐ other

Address at Graduation/School Exit: _____

Phone: _____

With whom does the student live (at graduation)? _____

Parent Name (please note if an adult student has a legal guardian): _____

Parent Address: _____

Parent Phone: _____

1. Exceptionality: (EF-S-05 codes, check one)

- | | |
|--|---|
| <input type="checkbox"/> mental retardation(1) | <input type="checkbox"/> other health impairment(8) |
| <input type="checkbox"/> hard of hearing(2) | <input type="checkbox"/> learning disability(9) |
| <input type="checkbox"/> deaf(3) | <input type="checkbox"/> deaf/blind(10) |
| <input type="checkbox"/> speech/language impairment(4) | <input type="checkbox"/> multi-handicapped(11) |
| <input type="checkbox"/> visual impairment(5) | <input type="checkbox"/> autism(13) |
| <input type="checkbox"/> behavioral impairment(6) | <input type="checkbox"/> traumatic brain injury(14) |
| <input type="checkbox"/> orthopedic impairment(7) | |

2. Special Education placement during last year of school attendance: (EF-S-05 codes)

- | | |
|---|--|
| <input type="checkbox"/> regular classroom(21) | <input type="checkbox"/> public separate day school(26) |
| <input type="checkbox"/> resource room(22) | <input type="checkbox"/> private separate day school(27) |
| <input type="checkbox"/> resource/composite(23) | <input type="checkbox"/> public residential(28) |
| <input type="checkbox"/> self-contained classroom(24) | <input type="checkbox"/> private residential(29) |
| <input type="checkbox"/> self-contained/composite(25) | <input type="checkbox"/> homebound/hospital(30) |

3. Did the student spend at least two-thirds of the time in regular class?

☐ yes ☐ no

4. Related services received during last year of school attendance:
(EF-S-05 codes)

- | | |
|---|--|
| <input type="checkbox"/> psychological services(31) | <input type="checkbox"/> transportation services(38) |
| <input type="checkbox"/> school social work services(32) | <input type="checkbox"/> school health services(39) |
| <input type="checkbox"/> occupational therapy(33) | <input type="checkbox"/> counseling services (40) |
| <input type="checkbox"/> speech and language services(34) | <input type="checkbox"/> other related services(41) |
| <input type="checkbox"/> audiological services (35) | <input type="checkbox"/> _____ |
| <input type="checkbox"/> recreation services(36) | <input type="checkbox"/> rehab counseling services(42) |
| <input type="checkbox"/> physical therapy(37) | |

5. Please identify all other services the student received during their high school years: (check all that apply)

- | | |
|--|--|
| <input type="checkbox"/> cooperation/distributive ed | <input type="checkbox"/> job coach |
| <input type="checkbox"/> functional life skills | <input type="checkbox"/> vocational education |
| <input type="checkbox"/> counseling services | <input type="checkbox"/> independent living skills |
| <input type="checkbox"/> recreational therapy | <input type="checkbox"/> business |
| <input type="checkbox"/> on-the-job training | |

6. Please identify all agencies from which student received services during their high school years: (check all that apply)

- | | |
|---|---|
| <input type="checkbox"/> Bureau of Mental Retardation | <input type="checkbox"/> Division of Eye Care |
| <input type="checkbox"/> Vocational Rehabilitation | <input type="checkbox"/> Transition Project |
| <input type="checkbox"/> Dept. of Corrections | <input type="checkbox"/> A community mental health agency |
| <input type="checkbox"/> JTPA | <input type="checkbox"/> Summer Youth Employment |
| <input type="checkbox"/> other (please specify) | |
| _____ | |
| _____ | |

7. Did the student attend the regional vocational education school? ☐ yes ☐ no

8. If yes, which category best describes the students program?

- ☐ Construction trades
☐ Office occupations
☐ Machine shop/auto repair
☐ Food Service
☐ Child care
☐ Health care services
☐ other

9. Did the student successfully complete the program? ☐ yes ☐ no

10. Did the student participate in cooperative education or on-the-job training as a component of his/her special education program?

☐ yes ☐ no

11. Did the student have a paying job while in school (during the summer or after school hours)?

☐ yes ☐ no

12. Did the student participate in extracurricular activities?

____ yes ____ no (if yes please list)

13. Did the student plan to:

____ attend 2 year college	____ attend 4 year college
____ attend a vocational technical / program	____ work
____ other educational program (please specify) _____	____ other (please specify) _____

14. Please indicate which services the student will likely access following school exit.

____ transportation

____ technological aids or adaptive equipment

____ mental health services

____ health related services

____ community living related services

____ postsecondary education

____ vocational training/employment related services

15. Using the EF-S-05 codes, please identify what anticipated service needs were projected for this student. _____

16. Reason for exit (EF-S-05 codes):

____ graduated with diploma(1)

____ graduated through certificate of completion/fulfillment of IEP(2)

____ reached maximum age(3)

____ dropped out(4)

____ status unknown(5)

____ GED

17. What supports will enable this student to complete a phone survey?

____, ____ none needed

What supports will enable this student to complete a mail survey?

____, ____ none needed

If the student is unable to complete either survey who would be the best respondent?

name:

address:

phone:

18. Please attach a copy of the student's transcript.

Signature of person completing form: _____

Title: _____

Date: _____

This material was produced by *The Center for Community Inclusion, Maine's UAP, University of Maine* with funds awarded by the *Committee on Transition*, through its federal School-to-Community Transition Systems Change Project for Youth with Disabilities

APPENDIX C

STUDENT OUTCOMES SURVEY COMPLETION

Student Outcomes Survey Completion Form

Survey Completed _____

Name: _____

Date of Graduation/School Exit: _____

Respondent's Name: _____
(If other than student)

Phone Number: _____

Best Survey Version for This Student to Use: _____MAIL _____PHONE
(from Exit Data Summary Sheet)

.....
MAIL VERSION

Date Mailed: _____

Date Returned: _____

.....
PHONE VERSION

First Attempt

Date: _____ Time: _____

- ☐ Wrong Number
- ☐ No Answer
- ☐ Not Home
- ☐ Moved, No Lead
- ☐ Moved, New Phone
- ☐ Refused
- ☐ Interview Complete

Second Attempt

Date: _____ Time: _____

- ☐ No Answer
- ☐ Not Home
- ☐ Moved, No Lead
- ☐ Moved, New Phone
- ☐ Refused
- ☐ Interview Complete

Third Attempt

Date: _____ Time: _____

- ☐ Wrong Number
- ☐ No Answer
- ☐ Not Home
- ☐ Moved, No Lead
- ☐ Moved, New Phone
- ☐ Refused
- ☐ Interview Complete

Fourth Attempt

Date: _____ Time: _____

- ☐ Wrong Number
- ☐ No Answer
- ☐ Not Home
- ☐ Moved, No Lead
- ☐ Moved, New Phone
- ☐ Refused
- ☐ Interview Complete

NOTES: